PTO/SB/17 (10-07)
Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reducti	respond to a collection of information unless it displays a valid OMB control numbe								
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  FEE TRANSMITTAL  For FY 2008				Complete if Known Application Number 10/762,547-Conf. #4977					
						January 23, 2004			
				First Named Inventor Hiroshi TANAKA  Examiner Name J. M. Villecco		<del>(A</del>			
Applicant claims small actify status. See 27 CED 4 07									
Applicant claims small entity status. See 37 CFR 1				7.11.07.11.		2622			
TOTAL AMOUNT OF PAYMENT		(\$) 120.00		Attorney Docket No.		2091-0308P			
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
X Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION									
1. BASIC FILING, SEARCH,	AND EXA	MINATION FEE	S						
	FILIN	IG FEES	SEA	ARCH FEES	EXAMIN	NATION FEES			
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees	Paid (\$)	
Utility	310	155	510	255	210	105	1 663	Tala (\$)	
Design	210	105	100	50	130	65			
Plant	210	105	310	155	160	80			
Reissue	310	155	510	255	620	310			
Provisional	210	105	0	0	0	0			
2. EXCESS CLAIM FEES								Small Entity	
Fee (\$) Fee (\$)								Fee (\$)	
Each claim over 20 (including Reissues)							50	25	
Each independent claim over 3 (including Reissues)							210	105	
Multiple dependent claims							370	185	
				aid (\$)	Mı	ultiple Depende	nt Claims		
9 -20 = x = Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.									
			Eas D	~:~! ( <del>()</del> )					
Indep. Claims Extra Cla		ee (\$) =	ree P	aid (\$)					
HP = highest number of independer		for, if greater than	3.						
3. APPLICATION SIZE FEE		, 5						4	
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer									
listings under 37 CFR 1.5 sheets or fraction thereof.	52(e)), the	application size	fee due	is \$260 (\$130 fc	or small en	tity) for each ad	ditional 5	0	
	a Sheets			ditional 50 or fract	ion thereof	F = Foo (\$)	Eoo	Paid (\$)	
							<u>  ee  </u>	raiu (\$)	
100 = /50 = (round <b>up</b> to a whole number) x =									
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 1251 Extension for response within first month							120.00		
SUBMITTED BY	111	/							
Signature	Jina	we. W. lbsi	VE)	Registration No. (Attorney/Agent)	32,181	Telephone	(703) 20	5-8000	
Name (Print/Pipe) Marc S. Weiner									
		27 30	737			,	rugusi Z	د, 2000	